



Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY		OTHER	
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE [OR ⊓ ।	SMALL	
							}	ATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 3		×	\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			/2 minus 3 =		9		X	40=		OR	X80=	720
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT							```		100
* If the difference in column 1 is less than zero, enter "0" in column 2							L_	35=		OR	+270=	
								TAL		OR	TOTAL.	1414
Claims as amended - Part II											OTHER	
	7	(Column 1)	Υ	(Colur HIGH		(Column 3)	JIV	IALL	ENTITY	OR	SMALL	FMIIIA
AMENDMENT A	>	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	xs	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X40=			X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPEND				CLAIM					OR	7.00-	
								35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	-	(Colur	nn 2)	(Column 3)			***	• ,•		
AMENDWENT B	·	CLAIMS REMAINING AFTER AMENDMENT	o	HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	l0=			X80=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=	
								35=		OR	+270=	
TOTAL ADDIT. FEE										OR ,	TOTAL ADDIT. FEE	
	·											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIC PAID F	EST BER JUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	 					
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=		OR	X80=	
+135: * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1	i ne "Highest Num	ber Previously Paid	d For" (Total or	Independe	nt) is the	highest numbe	r found in	the app	ropriate box	in colu	ımn 1.	